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FORM D

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UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL								
OMB Nun	ber:	323	35 -0 076					
Expires:	May	31,2	800					
Estimated	घण्डांस्	उस धिपा	den					
hours peri	msnon	SA.	16 00					

SEC	SEC USE ONLY Prefix Serial									
Prettu	Ser	lal								
DA	TE RECEIVED									
	1									

(or	
Name of Offering (check if this is an amendment and name has changed, and indicate change.)	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment	☐ ULOE
A. BASIC IDENTIFICATION DATA	1,20,000,000,000,000,000,000,000,000,000
1. Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) AMELOT HOLDINGS, INC.	08050448
Address of Executive Offices (Number and Street, City, State, Zip Code) P.O. Box 1616, New York, New York 10159	Telephone Number (Including Area Code) 846-552-4000
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	
DEVELOPER AND MANUFACTURER OF RENEWABLE ENERGY	DDO
Type of Business Organization corporation	plense specify): ENAY 2.7 2000
Month Year Actual or Estimated Date of Incorporation or Organization: 112 014 Actual Estir Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State CN for Canada; FN for other foreign jurisdiction)	THOMSON REUTERS

GENERAL INSTRUCTIONS

Redeent:

IVho Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

IFhen To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Illiere To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying an ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

- attention -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

		A-BASIGI I	DENTIFICATION DATA		
 Enter the information r Each promoter of 	•	_	within the past five years;		
•		_	, , ,	of, 10% or more of	a class of equity securities of the issuer.
		_	of corporate general and ma	naging partners of p	partnership issuers; and
Check Box(es) that Apply:	Promoter	f partnership issuers. Beneficial Owner	Executive Officer	☑ Director	General and/or Managing Partner
Full Name (Last name first, HIRJI, AZIZ	if Individual)		· · · · · · · · · · · · · · · · · · ·		
Business or Residence Addre P.O. BOX 1616, NEW Y		Street, City, State, Zip (RK 10159	Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip C	Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)		······		
Business or Residence Addre	ess (Number and	Street, City, State, Zip C	Code)	·	·
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	if individual)				
Business or Residence Addre	ess (Number and	Street, City, State, Zip C	Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last nome first, i	if individual)				
Business or Residence Addre	ess (Number and	Street, City, State, Zip C	Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
ull Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip C	Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Portner
fell Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip C	Code)		

					B. 1	VEORMAT	ION ABOU	T OFFERI	76 P				
1. H	las the	issuer sold	. or does th	e issuer i	ntend to se	ll. to non-e	ccredited i	nvestors in	this offeri	ne?		Yes	No ⊠
-, -		12227 0410	,			Appendix				_	•	L	
2. V	Vhat is	the minim	ım investm			• •	•	•			100104744711994044	s 10,	00.00
							•					Yes	No
3. D	oes th	e offering p	ermit joint	ownershi	p of a sing	le unit?		***********	*************		••••••	X	
C	ommis	sion or simi	lar remuner	ation for s	olicitation	of purchase	ers in conne	ction with	sales of sec	prities in t	irectly, any he offering. with a state		
		, list the na r or dealer,								ciated pers	ons of such		
		Last name f	<u> </u>										· · · · · · · · · · · · · · · · · · ·
		·· · · -		,									
Busin	ess or l	Residence A	Address (Ni	ımber and	l Street, Ci	ty, State, Z	(ip Code)						
Name	of Ass	sociated Bro	ker or Dea	ler				*************************************					· · · · · · · · · · · · · · · · · · ·
States	in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
(0	Check '	"All States"	' or check i	ndividual	States)			************	****		************	☐ All	States
7	IL.	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
_	L	[N]	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	AT RI	NE	NV SD	NH	(KI)	NM (TITE)	NY NT	NC NC	ND	OH 1977	OK D	OR	PA
Ľ	KU J	SC	ומצו	TN	TX	[UT]	[VT]	VA	WA	₩V	WI	WY	PR
Full N	ame (I	ast name f	irst, if indiv	/idual)	·								
Busine	ss or	Residence .	Address (N	umber an	d Street, C	ity, State,	Zip Code)		 .			·	
Name	of Ass	ociated Bro	ker or Den	ler	····				·				
Cintan	!_ W/L:	ish Dansan	r formal ry	0-11-21	1	O-11-1-1	N	····					
		ich Person 'All States"											States
,,,	HOUR	All Suites	ui check i	iini a taavi	Sincs)	*********	***************************************	*****************			********	∐ Ali	States
		AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	
		[N]	IA	(KS)	KY N	LA	ME	MD	MA	MI	MN	MS	MO]
	<u>ប</u>	NE.	NV SD	HM MT	LN]	MM UT	NY VT	NC VA	ND WA	OH WV	OKI WI)	OR WY	PA PR
		ast name fi											
								<u>-</u> .					
Busine	ss or	Residence a	Address (Ni	umber and	d Street, C	ity, State, 2	Lip Code)						
Name	of Assi	ociated Bro	ker or Deal	cr					·				
States	in Whi	ich Person	Listed Has	Solicited	or Intends	to Solicit I	urchasers	-					
(C	heck "	'All States"	or check is	ndividual	States)	>*************************************	***************	************	************	*************	******	□ All	States
Λ	L	ΛK	AZ	AR	CA)	CO	CT	DE	DC	FL	GΧ	HI	[ID]
		IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
		NE	NV	NH	NJ	NM	NY	NC	ND	OH	(OK)	OR	PA
LE	I	SC	SD	TN	TX	UT	VT	∇A	WA	WV	WI	WY	PR

COFFERING PRICE NUMBER OF INVESTORS EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	s 0.00	0.00
	Equity		s 73,000.00
	☐ Common ☐ Preferred		* =
	Convertible Securities (including warrants)	s 0.00	0.00 \$
	Portnership Interests		s 0.00
	Other (Specify)		\$ 0.00
	Total	s 1,000,000.00	s 73,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.		-
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors		\$ 73,000.00
	Non-accredited Investors	<u>0</u>	\$_0.00
	Total (for filings under Rule 504 only)	1	s_73,000.00
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		s_0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		s_5,000.00
	Printing and Engraving Costs		\$ 3,000.00
	Legal Fees	<u> </u>	\$_5,000.00
	Accounting Fees	<u> </u>	\$_1,000.00
	Engineering Fees	 /	2 0.00
	Sales Commissions (specify finders' fees separately)	_ ,	\$ 0.00
	Other Expenses (Identify)	-	S_0.00
	Total	/	s 14,000.00

	GOFFERING PRICE NUMBER OF INVESTORS, EXPENSES AND USE OF P	ROCEEDS	
	b. Enter the difference between the aggregate offering price given in response to Part C — Question 1 and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted gross proceeds to the issuer."	Triceman, maringan	\$ 986,000.00
5.	Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4.b above.		
		Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees	ן ג 140,000.0 <u>0</u>	☐\$ 0.00
	Purchase of real estate		\$ 0.00
	Purchase, rental or leasing and installation of machinery and equipment		
	Construction or leasing of plant buildings and facilities		
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)		
	Repayment of indebtedness	-	_
	Working capital	71 S	□ 5 500,000.00
	Other (specify): CONSULTING AND PROFESSIONAL FEES] \$	\$ 360,000.00
]\$	
	Column Totals	\$ 140,000.00	\$ 860,000.00
	Total Payments Listed (column totals added)		00.000,000
	III III III III III III III III III II		
sign	issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice ature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commiss information furnished by the issuer to any non-accredited intestor pursuant to paragraph (b)(2) of R	sion, upon written	
ssu	er (Print or Type) Signature /	ate	
ΑМ	ELOT HOLDINGS, INC.	492 25, 2008	
ναπ	oc of Signer (Print or Type) Title of Signer (Print or Type)		
ZIZ	CHAIRMAN, CHIEF EXECUTIVE OFFICER		

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E STATE SICHATURE		
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No ⊠
	See Appendix, Column 5, for state response.		
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is fit D (17 CFR 239.500) at such times as required by state law.	led a no	tice on Form
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, informat issuer to offerees.	ion furt	ished by the
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be ent limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claim of this exemption has the burden of establishing that these conditions have been satisfied.		
	er has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behal horized person.	f by the	undersigned
Issuer (Print or Type) Signature Date		
AMELO	T HOLDINGS, INC. ME 25, 2008	}	

CHAIRMAN, CHIEF EXECUTIVE OFFICER

Instruction:

Name (Print or Type)

AZIZ HIRJI

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or hear typed or printed signatures.

				<u> </u>	PENDIX					
]	Intend to non-a investor	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount pu	4 Finvestor and rehased in State C-Item 2)		Disqual under Str (if yes, explant waiver	5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
AL		×		0	\$0.00	0	\$0.00		×	
AK		×		0	\$0.00	0	\$0.00		x	
AZ		×		0	\$0.00	0	\$0.00		K	
AR		×		0	\$0.00	0	\$0.00		×	
CA		×	Common\$100,000	0	\$0.00	0	\$0.00		X	
CO		×		0	\$0.00	0	\$0.00		x	
ст		x	Common\$100,000	0	\$0.00	0	\$0.00		×	
DE		×		0	\$0.00	0	\$0.00		×	
DC		x		0	\$0.00	0	\$0.00		K	
FL		x	Common\$100,000	0	\$0.00	0	\$0.00		X	
GA		×		0	\$0.00	0	\$0.00		×	
н		×		0	\$0.00	0	\$0.00		X	
ID		×		0	\$0.00	0	\$0.00		×	
IL		Х		0	\$0.00	0	\$0.00		×	
IN		×		0	\$0.00	0	\$0.00		×	
lA		x		0	\$0.00	0	\$0.00		×	
KS		×		0	\$0.00	0	\$0.00		x	
KY		×		0	\$0.00	0	\$0.00		K	
LA		×		0	\$0.00	0	\$0.00		X	
ME		×		0	\$0.00	0	\$0.00		K	
MD		×		0	\$0.00	0	\$0.00		×	
МА		X	Common\$100,000	O.	\$0.00	0	\$0.00		×	
МІ		K		0	\$0.00	0	\$0.00		K	
MN		×		0	\$0.00	0	\$0.00		×	
MS		x		0	\$0.00	0	\$0.00		×	

	FAPPENDIX									
1	Intend to non-a investor	I to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		4 Type of investor and amount purchased in State (Part C-Item 2)				5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
мо		×		0	\$0.00	0	\$0.00		×	
MT		×		0	\$0.00	0	\$0.00		×	
NE		×		0	\$0.00	0	\$0.00		×	
NV		×		0	\$0.00	0	\$0.00		×	
NH		×		0	\$0.00	0	\$0.00		×	
NJ		×	Common\$100,000	0	\$0.00	0	\$0.00		×	
NM		×		0	\$0.00	0	\$0.00		x	
NY		×	Common\$200,000	0	\$0.00	0	\$0.00		×	
NC		K		0	\$0.00	0	\$0.00		×	
ND		×		0	\$0.00	0	\$0.00		×	
ОН		×		0	\$0.00	0	\$0.00		×	
ОК		×		0	\$0.00	0	\$0.00		K	
OR		×		0	\$0.00	0	\$0.00		K	
PA		×	·	0	\$0.00	0	\$0.00		×	
RI		x	_	0	\$0.00	0	\$0.00		×	
SC		×		0	\$0 .00	0	\$0.00		×	
SD		×		0	\$0.00	0	\$0.00		K	
TN		×		0	\$0.00	0	\$0.00		K	
тх		×	Common\$300,000	1	\$73,000.00	0	\$0.00		×	
UT		×		0	\$0.00	0	\$0.00		K	
VT		×		D	\$0.00	0	\$0.00		×	
VA		×		0	\$0.00	0	\$0.00		K	
WA		×		0	\$0.00	0	\$0.00		×	
wv		×		0	\$0.00	0	\$0.00		×	
WI		×		0	\$0.00	0	\$0.00		K	

1	Intend	2 I to sell accredited s in State	3 Type of security and aggregate offering price offered in state	APP	4 Type of investor and amount purchased in State					
State	(Part B	-Item 1)	(Part C-Item 1)	Number of Accredited Investors	(Part	C-Item 2) Number of Non-Accredited Investors	Amount	(Part E	-Item 1) No	
WY		×		0	\$0.00	0	\$0.00		к	
PR		×		0	\$0.00	0	\$0.00		K	